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APPLICANTS

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** CONTINUING DATA ***** NO

** FOREIGN APPLICATIONS ***** NO

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>JK 9/8/05</i> Initials	STATE OR COUNTRY MA	SHEETS DRAWING 6	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 4
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TITLE
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FILING FEE RECEIVED 1778	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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